PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

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CLAIMS AS FILED - PART I (Column 1) (Column 2)					mn 2)	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		11				RATE	FEE	1	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			/ / minus 20= *		* Ø		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			7 minus 3 = * 9			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT						+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in colum				column 2	TOTAL		OR	TOTAL	740		
CLAIMS AS AMENDED - PART II										OTHER	THAN
(Column 1) (Column 2) (Column 3)					(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	L	Minus ***		-	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
							TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)	ADDIT. FEE			ADDII. FEE	
_		CLAIMS		HIGH	EST			ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL
NON	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM				On		
							+140=		OR	+280=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	14	(Colur	nn 2)	(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-	X42=		0.0	X84=	
ľĽ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		7.1-		OR	7.0 /	
	If the entry in entry	mn 1 in loss that t	no ontre in set	uma O	· "O" !	lumn 2	+140=		OR	+280=	/
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE										
		nber Previously Pa					found in the app	ropriate box	in col	umn 1.	